

| MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET | | | | | | SERIAL NO. | FILING DATE | | |
|---|-----|------------------------|-----|------------------------|-----|--------------|-------------|--|--|
| | | | | | | APPLICANT(S) | | | |
| CLAIMS | | | | | | | | | |
| AS FILED | | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | | | | | |
| IND | DEP | IND | DEP | IND | DEP | IND | DEP | | |
| 1 | 1 | | | | | | | | |
| 2 | 1 | | | | | | | | |
| 3 | 1 | | | | | | | | |
| 4 | 3 | | | | | | | | |
| 5 | 3 | | | | | | | | |
| 6 | 3 | | | | | | | | |
| 7 | 3 | | | | | | | | |
| 8 | 3 | | | | | | | | |
| 9 | 3 | | | | | | | | |
| 10 | 3 | | | | | | | | |
| 11 | 3 | | | | | | | | |
| 12 | 3 | | | | | | | | |
| 13 | 3 | | | | | | | | |
| 14 | (1) | | | | | | | | |
| 15 | (1) | | | | | | | | |
| 16 | 1 | | | | | | | | |
| 17 | 1 | | | | | | | | |
| 18 | 1 | | | | | | | | |
| 19 | (1) | | | | | | | | |
| 20 | 1 | | | | | | | | |
| 21 | (1) | | | | | | | | |
| 22 | (1) | | | | | | | | |
| 23 | 1 | | | | | | | | |
| 24 | 1 | | | | | | | | |
| 25 | (1) | | | | | | | | |
| 26 | (1) | | | | | | | | |
| 27 | | | | | | | | | |
| 28 | (1) | | | | | | | | |
| 29 | (1) | | | | | | | | |
| 30 | (1) | | | | | | | | |
| 31 | (1) | | | | | | | | |
| 32 | (1) | | | | | | | | |
| 33 | 1 | | | | | | | | |
| 34 | 1 | | | | | | | | |
| 35 | 1 | | | | | | | | |
| 36 | 1 | | | | | | | | |
| 37 | 1 | | | | | | | | |
| 38 | 1 | | | | | | | | |
| 39 | 1 | | | | | | | | |
| 40 | 1 | | | | | | | | |
| 41 | 8 | | | | | | | | |
| 42 | 8 | | | | | | | | |
| 43 | 8 | | | | | | | | |
| 44 | 8 | | | | | | | | |
| 45 | 5 | | | | | | | | |
| 46 | 8 | | | | | | | | |
| 47 | 1 | | | | | | | | |
| 48 | 1 | | | | | | | | |
| 49 | 2 | | | | | | | | |
| 50 | 8 | | | | | | | | |
| TOTAL IND. | | | | | | | | | |
| TOTAL DEP. | | | | | | | | | |
| TOTAL CLAIMS | | | | | | | | | |

(2)

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

| | AS FILED | | AFTER 1ST AMENDMENT | | AFTER 2ND AMENDMENT | | |
|--------------|----------|-----|---------------------|-----|---------------------|-----|--|
| | IND | DEP | IND | DEP | IND | DEP | |
| 101 | 1 | 1 | | | | | |
| 2 | 2 | | | | | | |
| 3 | 1 | | | | | | |
| 4 | 1 | | | | | | |
| 5 | 1 | | | | | | |
| 6 | | | | | | | |
| 7 | | | | | | | |
| 8 | 1 | | | | | | |
| 9 | 1 | | | | | | |
| 10 | 1 | | | | | | |
| 11 | 1 | | | | | | |
| 12 | 1 | 1 | | | | | |
| 13 | | | | | | | |
| 14 | 1 | | | | | | |
| 15 | | | | | | | |
| 16 | | | | | | | |
| 17 | | | | | | | |
| 18 | | | | | | | |
| 19 | | | | | | | |
| 20 | | | | | | | |
| 21 | 8 | | | | | | |
| 22 | X | | | | | | |
| 23 | X | | | | | | |
| 24 | 3 | | | | | | |
| 25 | X | | | | | | |
| 26 | 8 | | | | | | |
| 27 | 1 | | | | | | |
| 28 | 1 | | | | | | |
| 29 | 1 | | | | | | |
| 30 | 3 | | | | | | |
| 31 | 2 | | | | | | |
| 32 | | | | | | | |
| 33 | 1 | | | | | | |
| 34 | 1 | | | | | | |
| 35 | 3 | | | | | | |
| 36 | 3 | | | | | | |
| 37 | 2 | | | | | | |
| 38 | 2 | | | | | | |
| 39 | 3 | | | | | | |
| 40 | 3 | | | | | | |
| 41 | | | | | | | |
| 42 | | | | | | | |
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| 49 | | | | | | | |
| 50 | 1 | | | | | | |
| TOTAL IND. | 24 | | | | | | |
| TOTAL DEP. | 27 | 8 | | | | | |
| TOTAL CLAIMS | 302 | | | | | | |

| CLAIMS | | | | | | | |
|--------|-----|-----|-----|-----|-----|-----|-----|
| IND | DEP | IND | DEP | IND | DEP | IND | DEP |
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|--------------|--|--|--|--|
| TOTAL IND. | | | | |
| TOTAL DEP. | | | | |
| TOTAL CLAIMS | | | | |